# ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY



W-03551A Virgin Mountain Utilities Company P. O. Box 668 Beaver Dam AZ 85432 RECEIVED

MAY 3 1 2005

AZ Corporation Commission Director Of Utilities

## ANNUAL REPORT

FOR YEAR ENDING

12 31 2004

FOR COMMISSION USE

ANN04

04

## **COMPANY INFORMATION**

Eller Address PA Ber 11	P		
Mailing Address 7.0. 1304 66.	<i>8</i>		
(Street)  LITTLE FIEL D  (City)	AZ	864.	32
(City)	(State)	(Zip)	
928. 747- 55/5	928-347-0117	435-229-2	334/
928-347-55/5 elephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Inc	lude Area Code)
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ocal Office Mailing Address			
	(Street)		
(City)	(State)	(Zip)	
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MAN Management Contact: Tom S  # 39 VIRGIN MOUNTAIN (Street)	NAGEMENT INFORMATI	MAU. (Title AZ (State)	,
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MAN  Management Contact: Tom S  #39 VIPGIN MOUNTAIN  (Street)  928-347-5515	NAGEMENT INFORMATI	MAU. (Title AZ (State)	2334
MAN  Management Contact: Tom S  # 39 VIRGIN MOUNTAIN (Street)  928-347-5515  Telephone No. (Include Area Code)	NAGEMENT INFORMATION (Name)  (Name)  (City)  (City)  (Page 147-01/7  Fax No. (Include Area Code)	MAN. (Title AZ (State) 435-229-	2334
MAN  Management Contact: Tom S  # 39   JEGIN MOUNTAIN (Street)  928-347-5515  Telephone No. (Include Area Code)  Email Address	(Name)  (Name)  (City)  (Par No. (Include Area Code)	(Title AZ (State) 435.229- Pager/Cell No. (Inc	2334 lude Area Code)
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MAN  Management Contact: Tom S  # 39 VIRGIN MOUNTAIN (Street)  928-347-5515  Telephone No. (Include Area Code)  Email Address	NAGEMENT INFORMATION (Name)  (Name)  DE: LITTLEFTELD (City)  928-347-01/7  Fax No. (Include Area Code)	(Title AZ (State) 435.229- Pager/Cell No. (Inc	2334 lude Area Code)
MAN  Management Contact: Tom S  # 39 UIDGIN MOUNTAIN (Street)  928-347-5515  Telephone No. (Include Area Code)  Email Address  On Site Manager: 5AME A	NAGEMENT INFORMATION (Name)  (Name)  (Name)  (City)  (City)  (ABOUE (Name)	(Title AZ (State) 435 - 229 - Pager/Cell No. (Inc	233 4 lude Area Code)
MAN  Management Contact: Tom S  # 39 UTEGIN MOUNTAIN (Street)  928-347-5515 Telephone No. (Include Area Code)  Email Address  On Site Manager: SAME A  (Street)	NAGEMENT INFORMATI  FODDARD (Name)  DR. LITTLEFTELD (City)  928-347-01/7  Fax No. (Include Area Code)  (City)  (City)  Fax No. (Include Area Code)	(State)  Pager/Cell No. (Inch	233 4 lude Area Code)

Please mark this box if the above address(es) have changed or are updated since the last filing.

2

Statutory Agent: <u>CICNABO</u> L.	SALQUIST	
J525 E. ADIZONA BILTMO	City)  (Name)  (Name)	10ENT4, AZ 85016 (State) (Zip)
102-224-9222 Telephone No. (Include Area Code)		
	Fax No. (Include Area Code	Pager/Cell No. (Include Area Code)
Attorney: SAME AS ABOUE	(Name)	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
		(0)
(Street)	(City)	(State) (Zip)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
		4. J -: 4b - 14 61:
Please mark this box if the above addre		ted since the last ming.
OWNE	RSHIP INFORMATION	and the same of th
Check the following box that applies to your	company:	
Sole Proprietor (S)	C Corporation (C) (Of	her than Association/Co-op)
Partnership (P)	Subchapter S Corpora	tion (Z)
☐ Bankruptcy (B)	Association/Co-op (A)	
Receivership (R)	Limited Liability Com	pany
Other (Describe)		
CO	DUNTIES SERVED	
Check the box below for the county/ies in wh	ich you are certificated to provide	service:
<b>П</b> АРАСНЕ	□ сосніѕЕ	
☐ GILA	☐ GRAHAM	GREENLEE
☐ LA PAZ	☐ MARICOPA	<b>⋈</b> MOHAVE
☐ NAVAJO	☐ PIMA	☐ PINAL
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA
☐ STATEWIDE		

### **UTILITY PLANT IN SERVICE**

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization	10,000	5000	5,000
302	Franchises			
303	Land and Land Rights	25,000	-4-	25,000
304	Structures and Improvements			
307	Wells and Springs	25,000	2.165	22,835
311	Pumping Equipment	,		,
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	5,000	322	4.678
331	Transmission and Distribution Mains	,		
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment	20,000	4.052	15,948
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	85,000	11,539	73,461

This amount goes on the Balance Sheet Acct. No. 108 -

## CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation  Expense (1x2)
301	Organization	10,000	20%	2,000
302	Franchises			
303	Land and Land Rights	25,000	-0-	-0-
304	Structures and Improvements			
307	Wells and Springs	25,000	3,33%	832.50
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	5,000	2.22%	111
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment	20,000	6.67%	1.334
340	Office Furniture and Equipment			,-,
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	85,000		4,277.50

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_ Acct. No. 403.

## **BALANCE SHEET**

Acct .No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ -0-	\$ -0-
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable	3,065,57	1,872.37
146	Notes/Receivables from Associated Companies		,
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 3,065.57	\$ 1,872.37
	FIXED ASSETS		
101	Utility Plant in Service	\$ 60,000	\$ 60,000
103	Property Held for Future Use	\$ 60,000	\$ 60,000
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	7,261.50	11,539
121	Non-Utility Property	,,	,
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$ 77,738,50	\$ 73461.00
	TOTAL ASSETS	\$ 80,804.07	\$ 75, 333.37

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

## COMPANY NAME UTRGIN MOUNTAIN LITTLES CO.

## **BALANCE SHEET (CONTINUED)**

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	LIABILITIES	YEAR	YEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$ -6-	\$ -4-
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes	447	576.14
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$ 447	\$ 576.14
	LONG TERM DERT (Over 12 Months)		
004	LONG-TERM DEBT (Over 12 Months)	\$ 85,000	\$ 85,000
224	Long-Term Notes and Bonds	\$ 85,000	\$5,000
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$ 85,447.00	\$ 85,536.14
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings	14,642,937	(10,242.77)
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$ 80,804.07	\$ 75333.37

## COMPANY NAME UTEGIN MOUNTAIN UTILITIES CO

## COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
No. 461	Metered Water Revenue	\$	\$
460	Unmetered Water Revenue	<u> </u>	
474	Other Water Revenues		
4/4	TOTAL REVENUES	\$	\$
	TOTAL REVENUES	Ψ	<u> </u>
	OPERATING EXPENSES		
601	Salaries and Wages	\$	\$
610	Purchased Water		
615	Purchased Power	180	114
618	Chemicals		
620	Repairs and Maintenance		
621	Office Supplies and Expense		
630	Outside Services		
635	Water Testing		
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		632.20
403	Depreciation Expense	4,277.50	4,277.50
408	Taxes Other Than Income		
408.11	Property Taxes	185.43	576.14
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 4,642.93	\$ 5,599.84
			,
	OPERATING INCOME/(LOSS)	\$ (4,642.93)	\$ (5,599.84)
	OTHER INCOME/(EXPENSE)		-
410	Interest and Dividend Income	\$	\$
419		Ψ	Ψ
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense	\$	\$
	TOTAL OTHER INCOME/(EXPENSE)	<u> </u>	ψ
	NET INCOME/(LOSS)	\$ {4,442.937	\$ (5,599.847

## COMPANY NAME UIDGIN MOUNTAIN LITTLES CO.

## SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan	SHAREHOL DER			
ACC Decision No.				
Reason for Loan	FUND CAPITAL IMPROVEMENT			
Dollar Amount Issued	\$ 85,000	\$	\$	\$
Amount Outstanding	\$ 85,000 \$ 85,000	\$	\$	\$
Date of Maturity				
Interest Rate	%	9/6	9/	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$ -0-	
Meter Deposits Refunded During the Test Year	\$ -0-	

## WATER COMPANY PLANT DESCRIPTION

### **WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
	7.5	70	300'	8''	2"	1996

<sup>\*</sup> Arizona Department of Water Resources Identification Number

### **OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
NONE		

BOOSTER PU	BOOSTER PUMPS		HYDRANTS		
Horsepower Quantity		Horsepower	Quantity Standard (	d Quantity Other	
NONE					
NONE					

Quantity	Capacity  10/33 GAL  DRAW DOWN	Quantity
	10/33 GAL	. ^
<u> </u>	DRAW DOWN	10
	,	

				_
COMPANY NAME	UTRGEN	MOUNTAIN	UTILITIES	Co

## WATER COMPANY PLANT DESCRIPTION (CONTINUED)

### **MAINS**

Size (in inches)	Material	Length (in feet)
2		
3		
4		
5		
6		
8		
10		
12		

#### **CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X <sup>3</sup> / <sub>4</sub>	
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Tubo 4	
Comp. 6	
Tubo 6	

TREATMENT EQUIPMENT:

\[ \lambda D \rangle \tilde{L} \]

STRUCTURES:

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				/
<b>COMPANY NAME:</b>	DIRGIN	MOUNTAIN	UTTLITIES	<u> Co</u> _

## WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2004

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY			
FEBRUARY			
MARCH			
APRIL			
MAY			
JUNE			
JULY			
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			
	TOTAL	N/A	NONE

Is the Water Utili	y located in an ADWR Active Management Area (AMA)?	
( ) Yes	( <b>⋉</b> ) <b>No</b>	
Does the Compan	have an ADWR Gallons Per Capita Per Day (GPCPD) require	ment?
( ) Yes	( X) No	
If yes, provide the	GPCPD amount:	
	f arsenic for each well on your systemmg/l please list each separately.)	
Note: If you are f	ing for more than one system, please provide separate data sheets	for each

## COMPANY NAME UTEGIN MOUNTAIN LITITIES CO YEAR ENDING 12/31/2004

## PROPERTY TAXES

tach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks operty tax payments) of any and all property taxes paid during the calendar year.				
o property taxes paid				
				<u> </u>

## COMPANY NAME UIRGIN MOUNTAIN UTILITIES CO YEAR ENDING 12/31/2004

### **INCOME TAXES**

For this reporting period, provide the following:	
Federal Taxable Income Reported	-6-
Estimated or Actual Federal Tax Liability	-0-
State Taxable Income Reported	-0-
Estimated or Actual State Tax Liability	-0-

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances	-0-
Amount of Gross-Up Tax Collected	-0-
Total Grossed-Up Contributions/Advances	-0-

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

### CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE

5/27/2005

DATE

TOM STODDARD

MANAGER

TOM STONDARD MANAGER
PRINTED NAME TITLE

## RECEIVE

## **VERIFICATION**

### AND

MAY 3 1 2005

## SWORN STATEMENT

RESIDENTIAL REVENUE Corporation Commission INTRASTATE REVENUES ONLY

Director Of Utilities

VERIFICATION

STATE OF ARIZONA COUNTY OF (COUNTY NAME)

Knhouse

NAME (OWNER OR OFFICIAL

OF THE

COMPANY NAME Uir and

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

I, THE UNDERSIGNED

MONTH DAY YEAR 12 31 2004

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2004 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

(THE AMOUNT IN BOX AT LEFT

**INCLUDES \$** 

IN SALES TAXES BILLED, OR COLLECTED)

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

918-347-5515

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

(SEAL)

Notary Public - State of Nevada County of Clark JEANNE LEWIS My Appointment Expires

September 13, 2006 MY COMMISSION EXPIRES

9/13/06

NOTARY PUBLIC NAME Seanne COUNTY NAME CLARK

20 05

# RECEIVED

### VERIFICATION AND SWORN STATEMENT **Intrastate Revenues Only**

MAY 3 1 2005

AZ Corporation	Commission
Director Of	Utilities
	- min (100

VERIFICATION COUNTY OF (COUNTY NAME) MOHAUE STATE OF ABIZONA NAME (OWNER OR OFFICIAL) TITLE TOM STODDARD
COMPANY NAME MANAGER I, THE UNDERSIGNED ITEGIN MOINTAIN LITTLETTES CO. OF THE

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

DAY MONTH 2004 12 31

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2004 WAS:

**INCLUDES \$** 

Arizona Intrastate Gross Operating Revenues Only (\$)

s\_ -0 -

(THE AMOUNT IN BOX ABOVE

	IN SALES TAXES BILLED, OR COLLECTED)
**REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)	SIGNATURE OF OWNER OR OFFICIAL  1-928-347-5515
SUBSCRIBED AND SWORN TO BEFORE ME	TELEPHONE NUMBER
A NOTARY PUBLIC IN AND FOR THE COUNTY OF	COUNTY NAME (LAR)
THIS Notary Public - State of	$\sim$
(SEAL)  (SEAL)  County of Clar  JEANNE LEW  My Appointment E  MY COMMISSION EXPIRES  No: 02-77850-1 / September 13, 2	18 earne Jewes

RECEIVED

### **VERIFICATION** AND **SWORN STATEMENT** Intrastate Revenues Only

MAY 0 2 2005

AZ Corporation Commission Director Of Utilities

VERIFICATION							
STATE OF	COUNTY OF ICOUNTY	2	A ,				
I, THE UNDERSIGNED	NAME (OWNER OR OFF	( e 1 VV	Y/Socrat	arg			
OF THE	Virgin Mt	- Utilities	lo				
DO SAY THAT THIS ANNUAL	UTILITY REPORT	Γ TO THE ARIZON		TION COM	<u>imission</u>		
FOR THE YEAR ENDING	MONTH 12	DAY 31	YEAR 2004				
HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.							
SWORN STATEMENT							
IN ACCORDANCE V 401, ARIZONA REV OPERATING REVER UTILITY OPERATION	ISED STATUTE NUE OF SAID U	S, IT IS HEREIT TILITY DERIVE	D FROM A				
		Arizona Intrastate Gro	oss Operating Rev	enues Only (S	<del>)</del>		
		s	0				
		(THE AMOUNT)	IN BOX ABO	VE	<del></del>		
		INCLUDES \$IN SALES TAXES	S BILLED, O	R COLLE	CTFD)		
**REVENUE REPORTED ON THIS INCLUDE SALES TAXES BILLED COLLECTED. IF FOR ANY OTHE THE REVENUE REPORTED ABO AGREE WITH TOTAL OPERATIF ELSEWHERE REPORTED, ATTA STATEMENTS THAT RECONCIL DIFFERENCE. (EXPLAIN IN DETAILS.)	or er reason, ve does not ng revenues ch those e the all)	SIGNATURE OF OWNER OR OF TELEPRONE NUMBER	JL J	Ind Ind	SA HILDERBRAND Mohrave County Public - Arizona Mohrave County Public - Series Oct 15, 2006	A Strategic and the second sec	
SUBSCRIBED AND SWORN TO B					Not	į	
A NOTARY PUBLIC IN AND FOR	THE COUNTY OF  DAY OF	MONITE April	200	2 4	Ž		
(SEAL)  MY COMMISSION EXPIRES / 0/	15/2000	Lua Micharde	SP NOTARY PUBLIC	<u>J</u> _		1	
WI CUMMISSION EATTRES					15	i 	

### VERIFICATION AND **SWORN STATEMENT** RESIDENTIAL REVENUE

MAY n 2 7005

AZ Corporation Commission Director Of Utilities

VERIFICATION

INTRASTATE REVENUES ONLY

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	John J. A.	
NAME (OWNER OR OFFICIAL)	Storday	TIME Sociatary
COMPANY NAME () LUAIN	mt at	11:1:109

(THE AMOUNT IN BOX AT LEFT

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

YEAR MONTH DAY 2004 12 31

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

### **SWORN STATEMENT**

ARIZONA INTRASTATE GROSS OPERATING REVENUES

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2004 WAS:

s	IN SALES TAXES BILLED, OR COLLECTED)
*RESIDENTIAL REVENUE REPORTED ON THIS PA MUST INCLUDE SALES TAXES BILLED.	GE SIGNATURE OF OWNER OR OFFICIAL
	1-916-347-5515 TELEPKINE PLIMBER
SUBSCRIBED AND SWORN TO BEFORE	ME NOTARY PUBLIC NAME LISA HIlderbrane
A NOTARY PUBLIC IN AND FOR THE C	F
THIS 29th DAY	OF MONTE CAPIL 2005
(SEAL)	x Sugkederbon
MY COMMISSION EXPIRES	SIGNATURE OF NOTARY PUBLIC

distance of mile THE WITH RURAND Removemble Adzona process country . . . . . . . Cet 15, 2006